



American Red Cross
South Mississippi Chapter

Jay Huffstatler
Chapter Executive

June 13, 2014

Biloxi Office
2782 Fernwood Drive
Biloxi, MS 39531
(228) 896-4511

Mayor Tommy Schafer
City of Diamondhead
7600 Country Club Circle
Diamondhead, MS 39525

Hattiesburg Office
2020 Hardy Street
Hattiesburg, MS 39401
(601) 582-8151

Dear Mayor Schafer and the City of Diamondhead:

Leakesville Office
419 Greene Street
Leakesville, MS 39451
(601) 394-5922

The mission of the American Red Cross is to prevent and alleviate human suffering in the face of emergencies by mobilizing the power of volunteers and the generosity of donors. These services are day-to-day services and do not include large disaster responses recent tornadoes across the state. Disaster Services expenditures are broken down as follows: *food, clothing, lodging, medications and disaster-related health care, referrals to community partners and government resources, and other essential items that can be used immediately during recovery.*

Lucedale Office
7102 Highway 198 East
Lucedale, MS 39452
(601) 947-9378

In addition to the above mentioned services, the American Red Cross South Mississippi Chapter provides canteen services upon the request of your local Emergency Management Agency. These services include providing water and snacks during disaster incidents to first responders.

Pascagoula Office
1096 Jackson Avenue
Pascagoula, MS 39567
(228) 762-2455

All American Red Cross disaster assistance and services are *free*, made possible by the generosity of donors such as yourself. Assistance to your community is provided without regard to citizenship, race, religion, age, culture or creed.

Waveland Office
716 Herlily Street
Waveland, MS 39576
(228) 467-7609

The American Red Cross will provide assistance to meet disaster-related needs to residents of Diamondhead while ensuring accountability to our donors and the American public. We recognize disaster related needs vary from incident to incident. Red Cross assistance is not an entitlement and is not intended to replace all disaster-related losses, replace or reimburse wages, or duplicate government and personal resources or other community assistance and services.

redcross.org/mississippi

On behalf of the American Red Cross South Mississippi Chapter, I thank you for your past support of the vital services provided in your community. I request the City of Diamondhead consider supporting American Red Cross Disaster Services for residents of Diamondhead in the amount of \$1,000.

I am more than happy to provide a formal presentation regarding our request at one of your upcoming meetings should you like me to. Please let me know so I can be placed on the meeting agenda.

Sincerely,

Jay Huffstatler

cc: Clerk, City of Diamondhead
Administrator/Manager, City of Diamondhead

City of Diamondhead, MS
Request for Council Action

TO: Honorable Mayor and Members of Council
FROM: Richard Rose, City Manager

☐ Ordinance ☐ Resolution ☐ Agreement/Contract ☐ Info Only ☐ Work Session Only
☐ Consent Agenda ☒ Regular Agenda ☐ Presentation/Appointment

AGENDA DATE REQUESTED:

July 1, 2014

ORDINANCE/RESOLUTION CAPTIONS or ISSUE: Discussion and or possible vote to implement a "Shredding Day" in DH.

SUMMARY BACKGROUND: MS. Scott and Ms. Ventura contacted Shred-It, a local company that conducts community shreds. Go to www.shredit.com for specifics. As far as I know, this has never been done in DH and I think this would be a worthwhile community event that could be held for 3 hours on a Saturday in the parking lot at City Hall.

IMPACT IF DENIED: Residents do not have an easy way to shred a large amount of sensitive documents.

IMPACT IF APPROVED: A worthwhile community event is held and residents could shred sensitive documents.

FINANCIAL IMPACT: The cost for a 3 hour shredding event appears to be \$750. Waste Management, the 3 local banks and the 1 credit union could be approached as possible partial sponsors.

REQUIRED SIGNATURES

REQUESTED BY:

Ernie Knobloch

City Manager:

City Attorney:

COUNCIL ACTION:

☐ Approved ☐ Denied ☐ Tabled/Deferred ☐ Info Only **Completed:**



City of Diamondhead

5000 Diamondhead Circle, Diamondhead, MS 39525-3260

Phone: (228) 222.4626

FAX: (228) 222.4390

www.diamondhead.ms.gov

June 23, 2014

Mayor and City Council
City of Diamondhead
5000 Diamondhead Circle
Diamondhead, MS 39525

Dear Mayor and Council:

Please approve to accept to accept 2 Magtek Mini Reader USB devices for credit card payment processing. The devices will be used for processing payments for the building and court departments. The cost for the equipment is \$199.00 each for a total of \$398.00.

Thank you in advance for your approval in this matter.

Sincerely,

Kristin Ventura
City Clerk

EQUIPMENT AGREEMENTMerchant # 93616460888 Sales Rep ID# HC27**LOCATION OF EQUIPMENT** Please indicate below where the equipment will be placed

LOCATION ADDRESS, CITY & STATE	EQUIPMENT	QUANTITY
1. <u>City of Diamondhead</u> <u>ATTN: Kristen Ventura</u>	<u>1</u>	<u>1</u>
2. <u>5000 Diamondhead Circle</u>	<u>1</u>	<u>1</u>
3. <u>Diamondhead, MS 39525</u>	<u>1</u>	<u>1</u>

SERVICE FEE & DEPOSIT TERMS

DESCRIPTION (MANUFACTURER, MODEL)	QUANTITY	PURCHASE/MONTHLY PAYMENT	DEPOSIT PER PIECE
<u>Magtek Mini Mag Reader USB</u>	<u>2</u>	<u>\$ 199.00</u>	<u>\$</u>
		<u>\$</u>	<u>\$</u>
		<u>\$</u>	<u>\$</u>
		<u>TOTAL \$ 398.00</u>	<u>TOTAL \$</u>

DBA Name of Business: City of Diamondhead
 Legal Name of Business: City of Diamondhead

IN WITNESS WHEREOF, the parties have caused this Equipment Agreement to be executed by their duly authorized officers.

Client's Business Principal:
 Signature (Please sign here):

Richard Rose
 Name (please print or type)

City Manager 3/14/14
 Title Date

PROCESSOR:

Signature:

Chickie Kerry
 Name (please print or type)

BC 3-13-14
 Title Date

Bank Name:

This Equipment Agreement ("Agreement") is being entered into by and between PROCESSOR and the CLIENT identified on the signature page of this Agreement. This Equipment Agreement governs the sale or rental of certain terminals, printers, and other equipment identified in the Merchant Agreement (the "Equipment"). The Equipment is provided to the CLIENT in connection with the services provided to the CLIENT pursuant to a related Agreement among the CLIENT, PROCESSOR and BANK governing the authorization, processing and settlement of Visa, MasterCard and Discover transactions and certain services with respect to other cards specified therein (the "Merchant Agreement"). THE EQUIPMENT IS NOT BEING SOLD OR RENTED TO THE CLIENT FOR HOME OR PERSONAL USE. In this Agreement, Equipment refers to any electronic terminal, electronic printer or other electronic peripheral equipment identified in the Merchant Agreement. In this Agreement, the words "we," "our," and "us" refer to PROCESSOR, and the words "you" and "your" refer to the CLIENT.

YOU ACKNOWLEDGE THAT THE EQUIPMENT AND/OR SOFTWARE YOU PURCHASE OR RENT FROM US MAY NOT BE COMPATIBLE WITH ANOTHER PROCESSOR'S SYSTEMS. WE DO NOT HAVE ANY OBLIGATION TO MAKE SUCH SOFTWARE AND/OR EQUIPMENT COMPATIBLE WITH ANY OTHER PROCESSING SYSTEMS. IN THE EVENT THAT YOU ELECT TO USE ANOTHER PROCESSING SERVICE PROVIDER UPON THE TERMINATION OF THIS AGREEMENT YOU ACKNOWLEDGE THAT YOU MAY NOT BE ABLE TO USE THE EQUIPMENT AND/OR SOFTWARE RENTED OR PURCHASED UNDER THIS AGREEMENT.

- Purchased Equipment Supplies.** We will sell to you, and you will buy from us the Equipment identified in the Merchant Agreement as being purchased by you (the "Purchased Equipment"), free and clear of all liens and encumbrances (subject to Section 7), except that any "Software" (as defined in Section 8) will not be sold to you outright, but instead will be provided to you pursuant to, and subject to the conditions of Section 8 of this Agreement. You shall pay the purchase price specified for the Purchased Equipment and the related software license(s), including all applicable tax, prior to the effective date of the Equipment Agreement or at our option, such amounts will be collected by us by debits or deductions pursuant to Section 5. We will provide you supplies as requested by you from time to time. You shall pay the purchase price for such supplies, plus shipping and handling charges, including all applicable tax, prior to delivery of the supplies or upon invoice, as specified by us, or at our option, such amounts will be collected by us by debits or deductions pursuant to Section 5. Maintenance and repair of customer-owned equipment is your responsibility. Should your terminal become inoperable we can provide you with equipment at a monthly rental fee. There will also be a nominal shipping and handling fee. For such rental equipment contact the POS Help Desk.
- Rental Equipment.** We agree to rent to you and you agree to accept and rent from us the Equipment identified in the Merchant Agreement as being rented to you (the "Rental Equipment"), according to the terms and conditions of this Agreement. In addition, any rental equipment ordered by you during the term of this agreement shall also be governed by the terms of this Equipment Agreement.
- Effective Date and Term of Agreement.** This Equipment Agreement shall become effective on the first date you receive any piece of Equipment covered. This Equipment Agreement will remain in effect until all of your obligations and all of our obligations under this Equipment Agreement have been satisfied. We will deliver the

Equipment to the site designated by you. You shall be deemed to have accepted each piece of Equipment at the earlier of: (a) your actual acceptance after installation, (b) delivery to you if your site is not prepared and ready for installation or (c) for Equipment that we have not agreed to install for you, seven (7) days after shipment of each such piece of equipment. The rental period with respect to each piece of Rental Equipment shall commence on the date such Equipment is deemed accepted and shall terminate at the scheduled termination date (but not upon any early termination) of your Merchant Agreement and/or any other agreement then in effect with us for card services. The provisions of this Agreement shall survive the termination or expiration of the Merchant Agreement and continue until all equipment rented from us is returned or paid for.

- Site Preparation, Installation & Maintenance.** You will prepare the installation site(s) for the Equipment, including but not limited to the power supply circuits and phone lines, in conformance with the manufacturer's and our specifications and will make the site(s) available to us by the confirmed shipping date.

- Upon request, you must allow us (or our agents) reasonable access to the premises where authorization terminals or other communications equipment (e.g., printers) are or will be located.
- Any alterations required for installation of authorization terminal(s) or other communications equipment will be done at your expense.
- Only we or our agents can alter or modify authorization terminal(s) or other communications equipment owned by us.
- If a terminal or printer appears to be defective, you must immediately call the POS Help Desk.
- You are responsible for safeguarding authorization terminals or other equipment from loss, damage, unauthorized use, misuse or theft. We should be notified immediately regarding any damage to or loss of communications equipment.
- If necessary, we will assist you in obtaining replacement equipment. If you fail to return any defective equipment, you may be responsible for its replacement value and for any legal and/or collection costs incurred by the equipment owner in connection with recovering equipment.
- You are responsible for keeping all communications equipment free of any claims, liens and legal processes initiated by creditors.
- Equipment may not be subleased at any time. The cost of comparable new equipment, as well as any associated legal and/or collection costs incurred by us or the owner of the equipment will be assessed to you for each piece of equipment not returned upon termination of the Agreement by either party, or upon request for the return of the equipment for any reason.
- You may not relocate, remove, disconnect, modify or in any way alter any equipment used in connection with the services we are providing to you without first obtaining our permission.
- You must provide us with thirty (30) days prior written notice to request the relocation of any equipment.
- Should you require additional equipment, you must contact Relationship Management or Customer Service (there may be additional costs or fees charged to you in connection with any new equipment ordered, including download fees).

RSAGEC1012(10)

Bank Account Update North Merchant Services



Date:

3-13-14

Effective Date:

3-13-14

MID #

1



Gift Card SE # (VLBC)



Funds Movement for Giftcard **

**Check the box for "Funds Movement for Giftcard" if the client is participating in funds movement.

*Business DBA/Legal Name:

City of Diamondhead

*Business DBA/Legal Name: Either the DBA Name or Legal Name must match what is on the system.

*Person Requesting Change:

Kristin TestermanCityClickPhone #: (228) 222-4626

*Person should be Owner, Officer or Legal Contact. Does not include Manager, Clerk etc.

Bank Name:

Hancock Bank

Bank Phone:

(228) 868-4000

Bank Address:

1 Hancock Plaza Gulfport, MS 39501

	Current (ABA) Routing #	New Routing (ABA) #	Current (DDA) Account #	New (DDA) Account #
1	<u>065503681</u>	<u>065503681</u>	<u>045913628</u>	<u>045913268</u>
2				
3				
4				
5				

Return completed and signed form along with a copy of a voided check or bank letter – DBA/Legal Name on check must match system.

If there is a Lead Chain location that matches the same bank routing and account number, then a voided check/bank letter is not required. The Lead Chain number must be provided on this form.

The person who signed the current merchant contract or the business owner MUST sign this request. I understand that this change will take approximately 2-3 business days after receipt of this request by First Data. Therefore, our existing Settlement Account will remain open during this time to prevent our deposits and associated fees from rejecting. In addition, I understand that if I accept American Express cards (800) 328-5200, Discover Cards (800) 347-2000 or Teloscheck Services (800) 366-1054 and I receive billing statements directly from these service providers, I must contact them to request a Settlement Account change.

Below are the signature(s) of all signer(s) of the Merchant Application authorizing First Data to make the change requested above.

Merchant Signature (Required)

Date:

3/14/14

This form should be submitted through the Merchant Service Center for expedited processing

Fax Option: 402-315-4802

Please allow 48 hours upon receipt to process all maintenance changes.

Revised 09/21/11

Mississippi Emergency Management Agency
P.O. Box 5644
Pearl, MS 39208

Jun 11, 2014

Richard Sullivan, Acting City Manager
Diamondhead, City of
Diamondhead, MS 39525

RE: Diamondhead, City of 4081-15

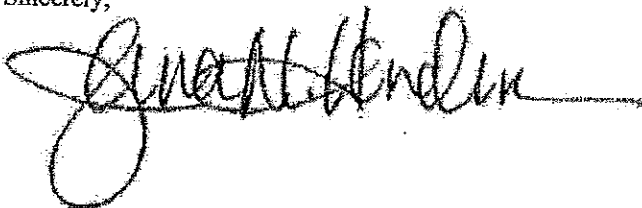
We are pleased to inform you that the above referenced Hazard Mitigation Grant has been approved and funded as indicated on the attached Hazard Mitigation Grant Program Agreement. The Hazard Mitigation Grant Program agreement should be signed and returned to this office prior to commencing any activities under your grant.

The following conditions are applicable to this grant:

1. A quarterly report detailing all project activities during the quarter must be submitted within 15 days after the end of each calendar quarter.
2. Any change in the scope of work, period of performance or budget must be requested in writing and have prior approval by MEMA and FEMA.
3. Reimbursement request of eligible cost should be submitted through MitigationMS.org and include copies of all invoices and receipts.
4. Staff from this office will meet with you prior to commencing work to discuss project and financial documentation and reporting requirements.

If you have questions concerning this matter, please contact your district Mitigation Grants Specialist or call 601-933-6884.

Sincerely,



Jana N. Henderson, SHMO
Director, Mitigation Grants Bureau
Office of Mitigation

HAZARD MITIGATION GRANT PROGRAM AGREEMENT

Under this Agreement, the interests and responsibilities of the Grantee, herein after referred to as the State, will be executed by the Mississippi Emergency Management Agency. The individual designated to represent the State is Robert R. Latham, Jr. Governor's Authorized Representative (GAR). The Subgrantee to this Agreement is Diamondhead, City of. The interests and responsibilities of the Subgrantee will be executed by the Subgrantee's designated applicant's agent.

Pursuant to the Hazard Mitigation Grant 4081-15, funds in the amount of \$467,344.20 are hereby awarded to the Subgrantee as stated below under the following conditions:

Approved Total Project Cost:	<u>\$491,941.00</u>	
Federal Cost Share:	<u>\$368,956.00</u>	<u>75.00%</u>
State Cost Share:		
Local Cost Share:	<u>\$122985</u>	<u>25.00%</u>

The Federal cost share may not be greater than 75% of the approved Federal project cost and the non-Federal share (State and Local cost share combined) may not be less than 25% of the approved Federal project cost.

The Subgrantee agrees that:

1. He/She has legal authority to apply for assistance on behalf of the Subgrantee.
2. The Subgrantee will provide all necessary financial and managerial resources to meet the terms and conditions of receiving federal and state disaster assistance.
3. The Subgrantee will use disaster assistance funds solely for the purposes for which these funds are provided and as approved by the Governor's Authorized Representative. Allowable costs shall be determined in accordance with the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 44 CFR § 206 and 44 CFR Part 13.
4. The payments for approved projects will be on an eligible cost reimbursement basis and subject to receipt and approval of invoices.
5. The Subgrantee is aware that limited funding available for mitigation requires cost sharing, and that the Subgrantee is required to provide the full non-federal share for such mitigation activities.
6. The Subgrantee will establish and maintain a proper accounting system to record

expenditure of disaster assistance funds in accordance with generally accepted accounting standards or as directed by the Governor's Authorized Representative.

7. The local cost share funding will be available within the specified time.
8. The Subgrantee will give state and federal agencies designated by the Governor's Authorized Representative, access to and the right to examine all records and documents related to use of disaster assistance funds.
9. The Subgrantee will return to the state, within 15 days of such request by the Governor's Authorized Representative, any advance funds which are not supported by audit or other federal or state review of documentation maintained by the Subgrantee.
10. The Subgrantee will comply with all applicable codes and standards as pertains to this project and agree to provide maintenance as appropriate.
11. The Subgrantee will comply with all applicable provisions of federal and state law and regulation in regard to procurement of goods and services.
12. The Subgrantee will comply with all federal and state statutes and regulations relating to non-discrimination. The Subgrantee will establish and maintain an active program of nondiscrimination in disaster assistance as outlined in implementing regulations. This program will encompass all Subgrantee actions pursuant to this Agreement.
13. The Subgrantee will comply with provisions of the Hatch Act limiting the political activities of public employees.
14. The Subgrantee will comply, as applicable, with provisions of the Davis Bacon Act relating to labor standards.
15. The Subgrantee will comply with the National Flood Insurance Program and the community's flood protection ordinance.
16. The Subgrantee will not enter into cost-plus-percentage-of-cost contracts for completion of Hazard Mitigation Grant projects.
17. The Subgrantee will not enter into any contract with any party that is debarred or suspended from participating in State or Federal assistance programs.
18. The Subgrantee will provide the Grantee copies of audit reports that include funds provided under this agreement.
19. The Subgrantee agrees that the disaster relief project contained in this Agreement will be completed by June 5, 2015. Completion dates may be extended upon justification by

the Subgrantee and approval by the Governor's Authorized Representative.

20. There shall be no changes to this Agreement unless mutually agreed upon, in writing, by both parties to the Agreement.

If the Subgrantee violates any of the conditions of this Agreement, or applicable federal and state regulations; the State shall notify the Subgrantee that financial assistance for the project in which the violation occurred will be withheld until such violation has been corrected to the satisfaction of the State. In addition, the State may also withhold all or any portion of financial assistance which has been or is to be made available to the Subgrantee for other disaster relief projects under the Act, this or other agreements, and applicable federal and state regulations until adequate corrective action is taken.

The undersigned does hereby agree with all terms and conditions of this agreement.

Robert R. Latham, Jr.
Governor's Authorized Representative

Subgrantee's Authorized Representative

Date

Date



U.S. Department of Homeland Security
FEMA Region IV
3003 Chamblee Tucker Road
Atlanta, GA 30341

FEMA

June 05, 2014

Mr. Robert R Latham, Jr., Director
Mississippi Emergency Management Agency
Post Office Box 5644
Pearl, Mississippi 39208

Attention: Ms. Jana Henderson

Reference: Hazard Mitigation Grant Program (HMGP) Project 4081-0015,
City of Diamondhead - City Hall Wind Retrofit

Dear Mr. Latham:

I am pleased to inform you that the project referenced above has been approved for \$491,941 with a Federal share of \$368,956 (75%). The non-federal share of \$122,985 is to be paid by the City of Diamondhead.

The following is the approved Statement of Work (SOW) for the above referenced project:

The purpose of this project is to upgrade windows, roof, doors and hardware at the new City Hall located at 63780 Diamondhead Dr N. Diamondhead, MS 39525, 30.382094 Latitude; -89.380946 Longitude. The Structure was initially rated to 110 mph with no required code at the time the building was built. However, the new IBC Code 2012 approved on August 20, 2012, makes the rating of structures 130 mph with the products specification rated higher than current code to 140 mph. These measures will help protect first responders, personnel, and equipment. The City of Diamondhead will house a 24 hour per day, 7 day per week crew of first responders during disasters.

FEMA will not establish activity completion timeframes for individual subgrants. The period of performance of the grant award will be three years from the date of the final subgrant award made under DR-4081. Please refer to Part VI Award Administration Information in the HMA Unified Guidance for further information on period of performance.

This project must adhere to all program guidelines established for the Hazard Mitigation Grant Program.

Please refer the subgrantee to the State HMGP Administrative Plan for project cost overrun regulations. If project costs exceed the amount originally funded and additional federal funds are needed, the subgrantee must contact the Governor's Authorized Representative (GAR). The GAR will evaluate requests for cost overruns and submit to the Regional Administrator written documentation of cost overrun eligibility. Cost overruns shall meet Federal regulations set forth in 44 CFR 206.438(b).

The State HMGP administrative plan defines the procedure whereby the GAR may advance portions of the approved Federal share to the subgrantee. Upon completion of the HMGP project, the subgrantee's closeout reimbursement for the final Federal share of eligible project costs must be submitted to the Regional Administrator for review and determination.

For close-out of this project, the Governor's Authorized Representative shall send a letter of request to close the project programmatically and financially. The letter will include the following: the date work on the project was fully completed, the date of the Grantee's final site inspection for the project, the final total project cost and Federal share, any cost underrun, a certification that reported costs were incurred in the performance of eligible work, that the approved work was completed, that the required programmatic, environmental, and any other conditions were met and that the mitigation measure is in compliance with the provisions of the Agreement Articles and this award letter.

Quarterly progress reports for HMGP projects are required. Please include this HMGP project in your future quarterly reports.

The National Environmental Policy Act (NEPA) stipulates that additions or amendments to a HMGP subgrantee SOW may have to be reviewed by all State and Federal agencies participating in the NEPA process.

Project Conditions:

1. Any change to the approved scope of work will require re-evaluation for compliance with NEPA and other Laws and Executive Orders.
2. This review does not address all federal, state, and local requirements. Acceptance of federal funding requires recipient to comply with all federal, state, and local laws. Failure to obtain all appropriate federal, state, and local environmental permits and clearances may jeopardize federal funding.
3. If ground disturbing activities occur during construction, applicant will monitor ground disturbance and if any potential archeological resources are discovered, will immediately cease construction in that area and notify the State and FEMA.

The State (grantee) must obtain prior approval from the Federal Emergency Management Agency (FEMA) before implementing changes to the approved project SOW. Per the Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments:

- For construction projects, the grantee must "obtain prior written approval for any budget revision which would result in a need for additional funds" (44 CFR 13.30(c)).
- A change in the scope of work must be approved by FEMA in advance regardless of the budget implications.
- The grantee must notify FEMA as soon as significant developments become known, such as delays or adverse conditions that might raise costs or delay completion, or favorable conditions allowing lower cost or earlier completion.

The obligation report is enclosed for your records. Management and environmental reports are available in NEMIS. The obligated funds are available for withdrawal from **Smartlink** on sub-account number **4081DRMSP00000005**.

If you have any questions, please contact Catherine Strickland of my staff at (770) 220-5328.

Sincerely,



for Jacky Bell, Chief
Hazard Mitigation Assistance Branch
Mitigation Division

Enclosures

06/09/2014

FEDERAL EMERGENCY MANAGEMENT AGENCY

HMGP-OB-02

12:34

HAZARD MITIGATION GRANTS PROGRAM

Obligation Report w/ Signatures

Disaster No	FEMA Project No	Amendment No	State Application ID	Action No	Supplemental No	State	Grantee
4081	15-R	0	17	1	15	MS	Statewide

Subgrantee: Diamondhead

Project Title : Diamondhead City Hall Wind Retrofit

Subgrantee FIPS Code: 045-19100

Total Amount Previously Allocated	Total Amount Previously Obligated	Total Amount Pending Obligation	Total Amount Available for New Obligation
\$368,956	\$368,956	\$0	\$0

Project Amount	Grantee Admin Est	Subgrantee Admin Est	Total Obligation	IFMIS Date	IFMIS Status	FY
\$368,956	\$0	\$0	\$368,956	06/09/2014	Accept	2014

Comments

Date: 06/09/2014 User Id: CSTRICK5

Comment: Obligation for 4081-0015 Diamondhead Wind Retrofit for \$368,956 Federal share for original funding.

Date: 06/09/2014 User Id: DBURKETT

Comment: 4081-0015-R Aplica Nr. 17 Allocation Nr. 11 Federal Share \$368,956 Diamondhead City Hall Wind Retrofit reported on June Spend P application approved for funding HMO

Authorization

Preparer Name: CATHERINE STRICKLAND

Preparation Date: 06/09/2014

HMO Authorization Name: DEBORAH BURKETT

HMO Authorization Date: 06/09/2014



Authorizing Official Signature

Chief, HMA Branch

Authorizing Official Title

6.9.14

Authorization Date

Authorizing Official Signature_____
Authorizing Official Title_____
Authorization Date

#	WS#	Amnd	Type	Description	Unit Cost	Qty	Cost	Expensed	Balance
1	1	0	Other	Demo existing shingle roof	\$1.25	30681	\$38,351.25	\$0.00	\$38,351.25
1	1	0	Other	Existing roof reinforcement	\$10,000.00	1	\$10,000.00	\$0.00	\$10,000.00
1	1	0	Other	New Roof membrane	\$0.70	30681	\$21,476.70	\$0.00	\$21,476.70
1	1	0	Other	New Standing Seam Metal Roof	\$8.00	30681	\$245,448.00	\$0.00	\$245,448.00
1	1	0	Other	24 Impact Resistant window at 18 sf	\$75.00	432	\$32,400.00	\$0.00	\$32,400.00
1	1	0	Other	4 Impact Resistant window at 74 sf	\$75.00	296	\$22,200.00	\$0.00	\$22,200.00
1	1	0	Other	10 Door Hardware	\$1,500.00	10	\$15,000.00	\$0.00	\$15,000.00
1	1	0	Other	Procurement - Newspaper	\$400.00	2	\$800.00	\$0.00	\$800.00
1	1	0	Other	8 Impact Resistant window at 9 sf	\$75.00	72	\$5,400.00	\$0.00	\$5,400.00
1	1	0	Other	1 Impact Resistant window at 47 sf	\$75.00	47	\$3,525.00	\$0.00	\$3,525.00
1	1	0	Other	28 Impact Resistant window at 11 sf	\$75.00	308	\$23,100.00	\$0.00	\$23,100.00
1	1	0	Other	7 Impact Resistant Doors at 47 sf	\$75.00	329	\$24,675.00	\$0.00	\$24,675.00
1	1	0	Other	1 Impact Resistant doors at 24 sf	\$75.00	24	\$1,800.00	\$0.00	\$1,800.00
1	1	0	Other	2 doors including entry vestibule at 288 sf	\$75.00	288	\$21,600.00	\$0.00	\$21,600.00
							\$465,775.95		\$465,775.95